

# Arizona Department of Veterans' Services



## Personal Information Packet For



**FINANCIAL INFORMATION**

Checking Account Location \_\_\_\_\_ Acct. # \_\_\_\_\_

Savings Account Location \_\_\_\_\_ Acct. # \_\_\_\_\_

Safe Deposit Box \_\_\_\_\_ Location of key \_\_\_\_\_

Other Assets (Stocks, Bonds, Securities, Savings Bonds, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

I have the following life insurance policies:

Company \_\_\_\_\_ Policy # \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Company \_\_\_\_\_ Policy # \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**MILITARY & VETERANS ADMINISTRATION (VA) INFORMATION**

Date of Enlistment \_\_\_\_\_ Place of Enlistment \_\_\_\_\_ Branch

Rank \_\_\_\_\_ Service # \_\_\_\_\_ Date of Discharge

Place of Discharge \_\_\_\_\_

Awards or Decorations \_\_\_\_\_

I am receiving VA: Disability Compensation % \_\_\_\_\_ Pension amount \$ \_\_\_\_\_

My VA Power of Attorney is \_\_\_\_\_ VA Claim # \_\_\_\_\_

Location of DD214 (Discharge) \_\_\_\_\_

**Inform the VA or Power of Attorney of my death to avoid an overpayment 1-800-827-1000**

The mortuary will assist with arrangements with the National Veterans Cemetery and in obtaining the American Flag.

I would like \_\_\_\_\_ to provide military honors. Call \_\_\_\_\_

Contact my VA power of attorney or the Arizona Department of Veterans' Services to see if you are entitled to any benefits.

Contact the Social Security Administration to advise them of my death to obtain benefits and avoid an overpayment.

